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Bib Data Sheet

CONFIRMATION NO. 1354

SERIAL NUMBER 09/903,201	FILING OR 371(c) DATE 07/10/2001 RULE	CLASS 358	GROUP ART UNIT 2625	ATTORNEY DOCKET NO. 10010392
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APPLICANTS

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** CONTINUING DATA *** *none kp*** FOREIGN APPLICATIONS *** *none kp***IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

** 08/25/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY ID	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance		2	15	2
Verified and Acknowledged <i>kp</i> Examiner's Signature _____ Initials _____				

ADDRESS

57299

TITLE

Point-of-sale demonstration of computer peripherals

FILING FEE RECEIVED 710	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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